

State of Vermont

Vermont Health Information Technology Plan (VHITP)

Project Initiation

February 2015

Agenda

- Introductions
- VHITP Project – Background and Environment
- State's Expectations for the VHITP
- Project Organization
- Steering Team Roles and Responsibilities
- VHITP Core Values 2007, 2010
- VHITP Project Principles
- Project Implementation
- Q&A



Mosaica Partners – Who We Are



Mosaica Partners is a nationally recognized health information strategy and health information exchange consulting firm



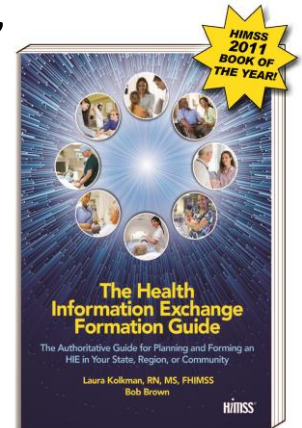
Our clients include: the federal government, states, regions, communities, ACOs, IDNs, Payers, HIE/HIT vendors, and organizations that manage and share health information electronically



Our employees and network of associates include clinicians, consultants and researchers



Laura Kolkman and Bob Brown are co-authors of the award-winning book, “The Health Information Exchange Formation Guide”



Mission

Our mission is to improve the quality of health care by enabling, improving and advancing health information use and exchange.

BACKGROUND AND ENVIRONMENT

Vermont Statute: 18 V.S.A § 9351

Health Information Technology Plan

The HIT Plan shall include:

“the implementation of an integrated electronic health information infrastructure for the sharing of electronic health information among health care facilities, health care professionals, public and private payers, and patients.”

“standards and protocols designed to promote patient education, patient privacy, physician best practices, electronic connectivity to health care data, and, overall, a **more efficient and less costly means of delivering quality health care in Vermont.**”

Vermont Statute: 18 V.S.A § 9351

(1 of 3)

The HIT Plan shall:

- 1) support the **effective, efficient, statewide use of electronic health information** in patient care, health care policymaking, clinical research, health care financing, and continuous quality improvements;
- 2) **educate** the general public and health care professionals about the value of an electronic health infrastructure for improving patient care;
- 3) ensure the **use of national standards** for the development of an interoperable system, which shall include provisions relating to security, privacy, data content, structures and format, vocabulary, and transmission protocols;

Vermont Statute: 18 V.S.A § 9351

(2 of 3)

The HIT Plan shall:

- 4) propose **strategic investments** in equipment and other infrastructure elements that will facilitate the ongoing development of a statewide infrastructure;
- 5) recommend funding mechanisms for **the ongoing development and maintenance** costs of a statewide health information system, including funding options and an implementation strategy for a loan and grant program;
- 6) **incorporate the existing health care information technology** initiatives to the extent feasible in order to avoid incompatible systems and duplicative efforts;

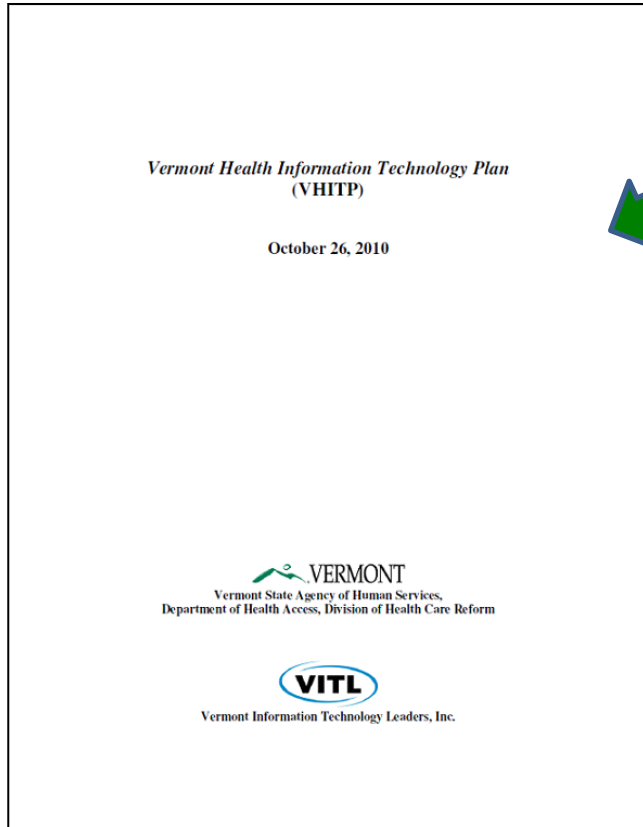
Vermont Statute: 18 V.S.A § 9351

(3 of 3)

The HIT Plan shall:

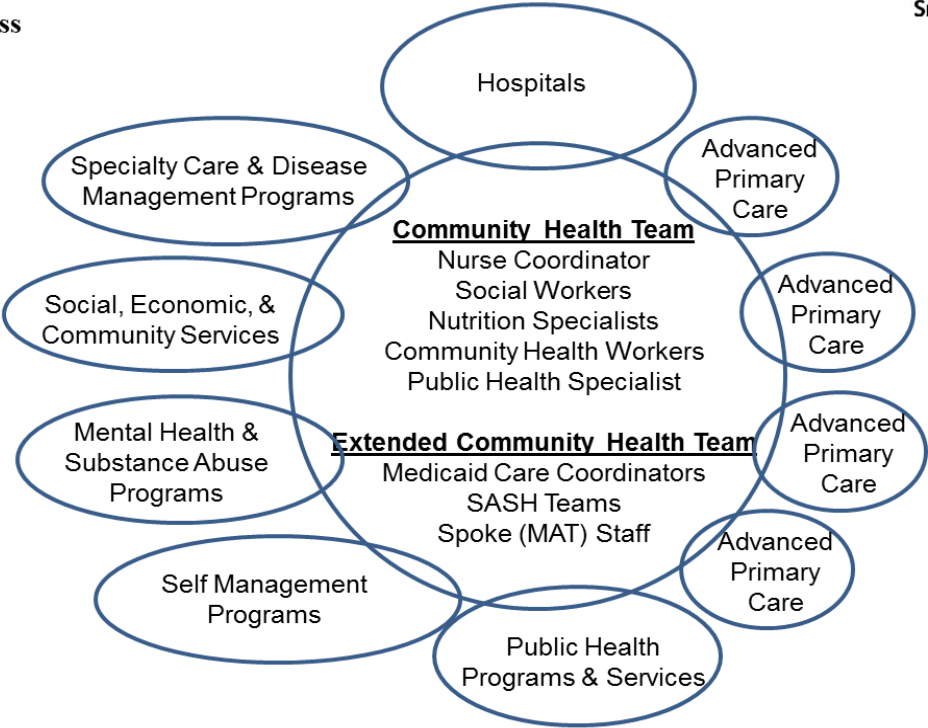
- 7) **integrate** the information technology components of the Blueprint for Health established in chapter 13 of this title, the Agency of Human Services' Enterprise Master Patient Index, and all other Medicaid management information systems being developed by the Department of Vermont Health Access, information technology components of the quality assurance system, the program to capitalize with loans and grants electronic medical record systems in primary care practices, and any other information technology initiatives coordinated by the Secretary of Administration pursuant to 3 V.S.A. § 2222a; and
- 8) address issues related to **data ownership, governance, and confidentiality and security of patient information.**

We're Not Starting from Scratch...



- This new version will be the 3rd HIT Plan since 2007
- 2010 version is the latest version – with revisions in 2012 and 2014 related to HIE consent
- Significant Progress
 - Adoption and Use of EHRs by providers
 - Connections to and development of HIE by VITL
 - Large and growing quantity of data in HIE
 - Significant attention to data quality and reliability
 - 2014 – beginnings of true exchange among providers – VITL Access
 - Other services around the corner
 - e.g., event notifications

Connections to Health Reforms



All-Insurer Payment Reforms
Local leadership, Practice Facilitators, Workgroups
Local, Regional, Statewide Learning Forums
Health IT Infrastructure
Evaluation & Comparative Reporting



Scope and Changing Landscape

- VHITP focus will continue to be on the electronic collection, storage, and exchange of **clinical or services** data
- State IT Landscape
 - Brief descriptions of current or future integrations with other major State health IT initiatives (e.g., MMIS, Integrated Eligibility, VHCURES, VHC)
 - VT Health Care Innovation Project (SIM)
- Federal Landscape
 - New ONC 10-Year Interoperability Roadmap
 - CMS Rules and Policy
 - New Payment Reforms will be HUGE
 - Meaningful Use Stage 3
 - Anticipated updates to 42CFR part 2

State's Expectations for the VHITP

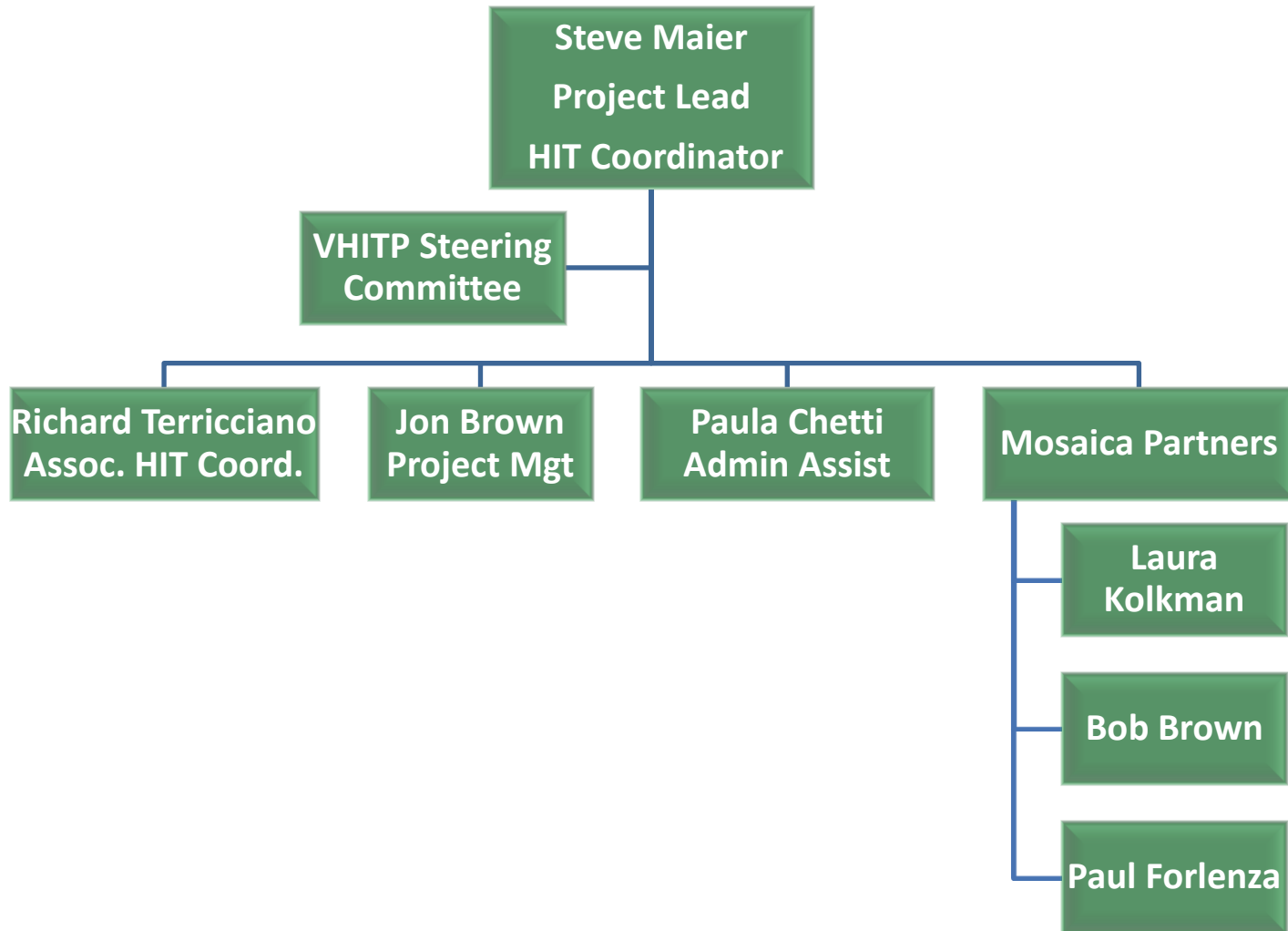
The State Expects the VHITP Will:

- Set high-level strategy and roadmap for the electronic collection, storage, and exchange of clinical or service data in support of improved patient care, improved health of Vermonters, and lower growth in health care costs – the Triple Aim
- Provide direction for future projects, initiatives, and funding
- Serve as a framework for regulatory authority such as GMCB review of IT projects within the Certificate of Need process or to support HIE connectivity/ interoperability criteria

Authority and Process

- State is responsible for HIT Plan Development and Revisions
 - AoA delegated to DVHA
 - Shall solicit recommendations from VITL
 - And other stakeholders
 - AoA Secretary will approve prior to submission to Green Mountain Care Board
- GMCB – independent review and final approval
- VITL shall be designated in the HIT Plan to operate the exclusive statewide health information exchange network for Vermont.

Project Organization



Steering Committee Roles and Responsibilities

Provide advice and counsel to help steer the VHITP project to success.



Responsibilities:

- Provide insight and guidance into shaping Vermont's future HIT/HIE environment
- Bring your perspectives to the project
- Leave personal/organizational agendas at the door
- Ensure that key challenges and issues are addressed
- Identify opportunities that should be considered
- Offer guidance to ensure the results provide a solid state Health IT Plan
- Review the final draft of the plan for completeness and reasonableness
- Publically support the project

Who is Involved in Project

Key Stakeholders Include:

- ✓ Hospital Systems
- ✓ Providers
- ✓ Payers
- ✓ Behavioral Health
- ✓ Long Term / Post Acute Care
- ✓ Public Health
- ✓ Rural and Urban
- ✓ VITL
- ✓ State Agencies
- ✓ ACOs
- ✓ Consumers
- ✓ Consumer organizations
- ✓ U VT College of Medicine
- ✓ Federal Agencies (CMS, ONC)
- ✓ Others



VHITP Core Values – 2007 and 2010

Are They Still Valid Today?

1. Vermonters will be confident that their health care information is secure and private and accessed appropriately.
2. Health information technology will improve the care Vermonters receive by making health information available where and when it is needed.
3. Shared health care data that provides a direct value to the patient, provider, or payer is a key component of an improved health care system. Data interoperability is vital to successful sharing of data.
4. Vermont's health care information technology infrastructure will be created using best practices and standards, and whenever possible and prudent, will leverage past investments and be fiscally responsible.
5. Stakeholders in the development and implementation of the health care technology infrastructure plan will act in a collaborative, cooperative fashion to advance steady progress towards the vision for an improved health care system.

VHITP Project Principles



Ensure broad-based ongoing healthcare stakeholder involvement

Ensure that the VHITP addresses statewide HIT/HIE needs

Enable and advance the use and adoption of HIT/HIE in Vermont

Leverage Vermont's prior work and investments in HIT/HIE

Create achievable, actionable, and practical initiatives

PROJECT IMPLEMENTATION

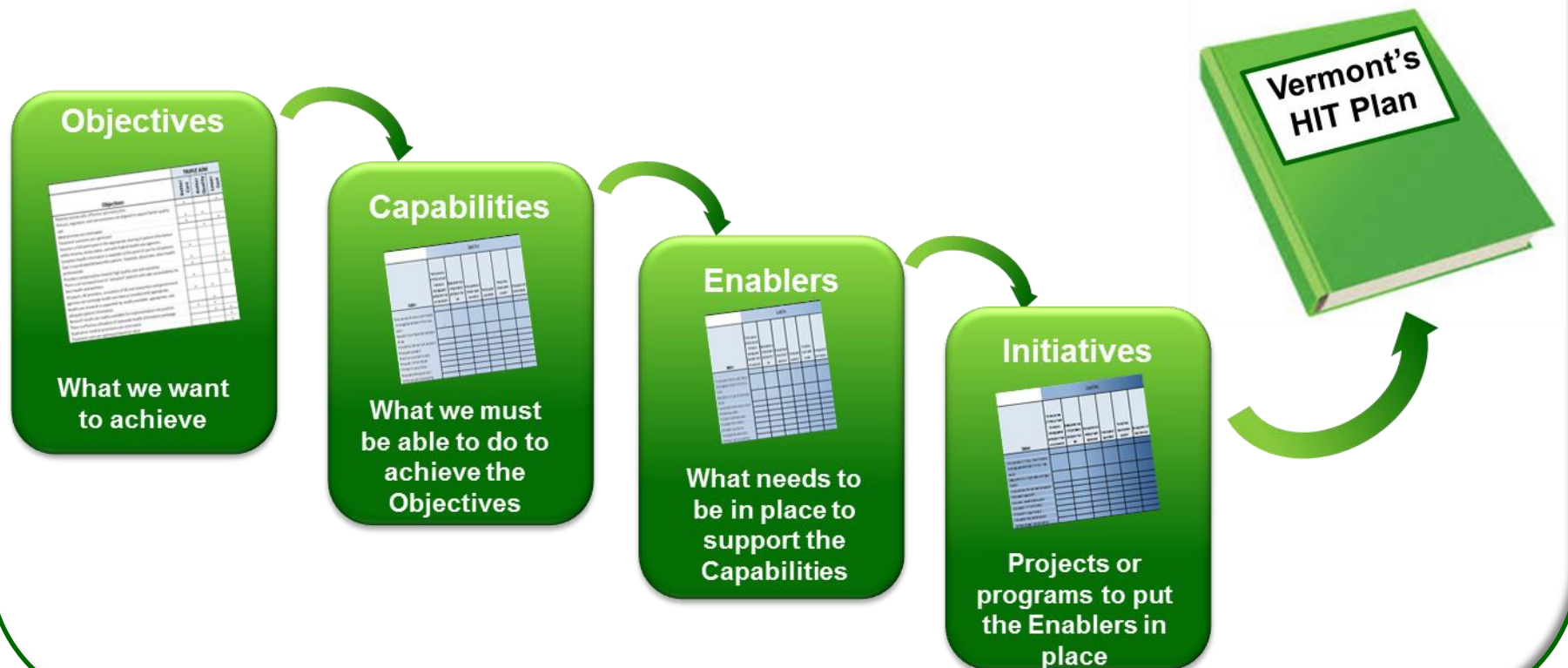
Project Process

- Hold pre-project meetings with VITL and HIE workgroup
- Hold project Kick-Off to introduce and explain the project
- Conduct workshops with key healthcare stakeholders to describe Vermont's HIT/HIE desired future state
- Validate workshop findings through a survey of the broader stakeholder community.
- Convene public meetings to review progress and solicit feedback



**Open and transparent with
broad stakeholder participation**

VHITP Development Process



Current Timeline

VHITP Timeline	Feb.	March	April	May	June	July
Project Initiation						
Project Preparation and Kick-Off						
Gather and Analyze Information						
Conduct Vermont environmental scan						
Conduct National environmental scan						
Conduct Interviews with key stakeholders						
Conduct Stakeholder survey						
Hold work session to determine capabilities						
Hold work session to determine the required enablers						
Perform gap analysis						
Define initiatives required to close the gaps						
Update VHITP						
Develop VHIT Plan Outline						
Draft VHIT Plan						
Finalize the VHIT plan and deliver						



Thank You

Contact information:

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